

Well Construction Report WISCONSIN UNIQUE WELL NUMBER				QX066		Drinking Water and Groundwater - DG/5 Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A											
Property Owner MIKKELSON BUILDERS						Phone # (262)241-8740		1. Well Location				Fire # (if avail.)									
Mailing Address 1025 W GLEN OAKS LN						Town of CEDARBURG						Street Address or Road Name and Number									
City MEQUON				State WI		Zip Code 53092		4937 TIMBERCREST DR				Subdivision Name		Lot #		Block #					
County Ozaukee		Co. Permit #		Notification #		Completed 09-18-2003		Latitude / Longitude in Decimal Degree (DD)				Method Code									
Well Constructor (Business Name) LAABS WELL DRILLING INC				Lic. # 560		Facility ID # (Public Wells)		43.2897 °N -87.973 °W				GCD013									
Address 2245 HWY 175 BOX 94 RICHFIELD WI 53076				Well Plan Approval #		SW NE Section Township Range		or Govt Lot # 35 10 N 21 E				2. Well Type New Well									
				Approval Date (mm-dd-yyyy)		Reason for replaced or reconstructed well ?				of previous unique well # constructed in											
Hicap Permanent Well #		Common Well #		Specific Capacity 0.3		Hicap Well ? No		Construction Type Drilled				Hicap Property ? No									
3. Well serves 1 # of Private, potable				Heat Exchange ___ # of drillholes		Hicap Potable ?															
4. Potential Contamination Sources - ON REVERSE SIDE																					
5. Drillhole Dimensions and Construction Method														8. Geology							
Dia. (in.)		From (ft.)		To (ft.)		Upper Enlarged Drillhole		Lower Open Bedrock		Geology Codes		8. Geology Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)		To (ft.)					
8.75		Surface		45		Yes Rotary - Mud Circulation		No		R - C -		RED CLAY		Surface		19					
6		45		162		Yes Rotary - Air		No		- - G -		GRAVEL		19		45					
						Rotary - Air & Foam				- - L -		LIMESTONE		45		162					
						Drill-Through Casing Hammer															
						Reverse Rotary															
						Cable-tool Bit ___ in. dia...															
						Dual Rotary															
						Temp. Outer Casing ___ in. dia															
						Removed? ___ depth ft. (If NO explain on back side)															
6. Casing, Liner, Screen														9. Static Water Level				11. Well Is			
Dia. (in.)		Material, Weight, Specification Manufacturer & Method of Assembly				From (ft.)		To (ft.)		40 ft. below ground surface				18 in. above grade							
6		18.97#/FT WELDED JOINTS NEW BLACK A53 WELDED				Surface		45		10. Pump Test				Developed ? Yes							
										Pumping level 100 ft. below surface				Disinfected ? Yes							
Dia. (in.)		Screen type, material & slot size				From (ft.)		To (ft.)		Pumping at 20 GP M for 10 Hrs.				Capped ? Yes							
										Pumping Method ?											
7. Grout or Other Sealing Material														12. Notified Owner of need to fill & seal ?							
Method														Filled & Sealed Well(s) as needed? Yes							
Kind of Sealing Material				From (ft.)		To (ft.)		# Sacks Cement		13. Constructor / Supervisory Driller				Lic #		Date Signed					
ROTARY DRILLING MUD				Surface		45		4 S		RL						09-27-2003					
										Drill Rig Operator				Lic or Reg #		Date Signed					

4a. Potential Contamination SourcesIs the well located in floodplain ? No

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)	>	75	Building Overhang		25
			Septic or Holding, or POWTS Tank	>	50

Comment:

Water Quality Text:

Water Quantity Text:

Difficulty Text:

Created On: 10-16-2003

Created by: WELL CONST LOAD

Updated On: 07-15-2019

Updated by: PARCEL_MATCH